"What a Long, Strange Trip It's Been": The Uses and Abuses of Psychedelics in Psychotherapy From 1949 to the Present Alicia Farrell

Abstract

This article reviews the literature on the lysergic acid diethylamide (LSD) published since its first synthesis in 1938 to the present. First recognized as a miracle drug for treating disorders ranging from alcoholism to anxiety, LSD became the "poster drug" of the 1960's and 1970's. A movement within the government to de-legalize and, in fact, criminalize LSD soon followed. With criminalization came a halt in legitimate research on the potential benefits of LSD, and scientific literature from that period is scant. This review therefore seeks to determine the extent to which scientific research is controlled by social factors and the potential loss the halt in LSD research has meant for therapists, psychiatrists, medical practitioners and their patients.

Introduction

Since its synthesis in 1938, LSD has been heralded as a miracle drug for treating things from alcoholism to anxiety and as the creating force behind the well-known hippie counterculture of the 1960's. In the late '60's and into the 70's, LSD and the other psychedelic drugs grew infamous as they were placed on the DEA's Schedule I list and stories of misuse were sensationalized. As researchers today inconspicuously resume studies on the potential uses of these drugs, it becomes necessary to ask if early research in the use of these drugs yielded results implying that psychedelics were beneficial to the therapeutic field. If these kinds of results were found, we must further ask: to what extent was their prohibition and negative reputation, perpetuated by the media, responsible for the abandonment of this research and the hesitancy to restart it?

All sources cited agreed upon the early history of the psychedelics. Natural psychedelic drugs, found mostly in plants, have been used in religious rites and creative undertakings in many parts of the world since, at least, the advent of writing (Baruss; Aaronson; Edwards; Mishan; Grinspoon & Doblin; Friedman; Williams). It was the synthesis of LSD (lysergic acid diethylamide) in 1938 by Albert Hoffman that brought the psychedelic experience to the modern Western civilizations of the United States and Europe. Having derived LSD from a fungus, ergot, Hoffman discovered its consciousness altering powers upon accidentally absorbing roughly 250 micrograms through his fingertips. Although he found his experience rather disturbing, he sensed potential in the drug for therapeutic purposes. Hoffman and his employer, the Sandoz Company of Switzerland, began distributing the drug for experimental purposes to psychiatrists throughout Europe and the U.S. (Baruss; Aaronson; Edwards; Mishan; Novak; Grinspoon & Doblin; Friedman; Williams). And thus began LSD's journey in the U.S.

Early Research in the Field 1949-1966

In the 1950's and early 60's, research in LSD was at its peak. This early research is marked by an optimistic nature and a personal investment in the results of the studies. The observations and results of these studies are interpreted subjectively by the researchers. Experimenters attempt to delve into the psychological state of the subject. Psychedelics were not treated as cures, but adjuncts to psychotherapy (Hoffer; Kast; Richardson; Aaronson). This point is said best by Hoffer, who states: "Psychedelic therapy aims to create a set and setting that will allow proper psychotherapy. The

psychedelic therapist works with material that the patient experiences and discusses, and helps him resynthesize a new model of life or a new personal philosophy" (360). This goal is apparent in all of these earliest sources. Hoffer, studying LSD as an adjunct and a preparation for Alcoholics Anonymous, finds that because of this method "50 percent [of alcoholics studied] were able to remain sober or to drink much less." These high rates of success and optimism are common throughout this portion of the literature (Kast; Richardson; Aaronson). Kast's study in using LSD with psychotherapy to alleviate the anxiety of death in terminal patients find a large majority of patients willing to take LSD again and finds enthusiasm in the brief respite his subjects received. He reports, "Although short-live and transient, this happy state of affairs was a welcome change in their monotonous and isolated lives, and recollection of this experience days later often created similar elation" (381).

These studies differ slightly from the research of Richardson and Aaronson. Although optimism and subjectivity is retained, Richardson and Aaronson differ from the previous two authors in their personal investment and interpretation of the results. These two sources originate from personal experience receiving psychotherapy while under the influence of LSD. While Kast and Hoffer concede that the beneficial effects of LSD are "short-lived," Richardson and Aaronson claim lasting beneficial effects specific to the conflicts they were facing during the session. However, this conflict seems rather irrelevant when the subjectivity of all studies involved in reconsidered. It is perhaps because of Richardson and Aaronson's personal experience with the drug that they are willing to suggest longer lasting results.

Written in hindsight, multiple sources also outline studies done at this time. The sources of this subtype lack the optimism and personal bias of the previous literature and deal directly with the methodological flaws and hazards apparent in early research. They are written by third parties who did not experience the explosive popularity in psychiatry in the 1950's and early 60's and that have not experienced the effects of the drug. The early studies seem to contain many of the same flaws. They are entirely subjective, the researchers involved are financially and personally invested in the success of the drugs involved, and little is known of the long-term effects of the drugs, or the effects of multiple large doses (Novak; Sigafoos, Green, Edrishna, & Lancioni). In studies retold by Sigafoos et al. in which LSD is used in an attempt to treat autism, and in the studies done by Sidney Cohen and outlined by Novak, it becomes clear that the drug is less hazardous than the people administering it were at the time. Most therapists had indulged in the drug themselves to achieve empathy with their subjects (Novak) and many became heavy users, even aiding the black market in receiving and duplicating the drugs. Therapists were also known to administer LSD for the financial benefits, which were growing as LSD's reputation as a miracle drug circulated the US. This led to inadequately trained therapists doling out drugs in heavy doses without knowing the effects of the drug on certain psychological states (Novak). The study on autism demonstrates that optimism and subjectivity can be harmful as the results yield nothing useful but are interpreted by the researchers themselves as "positive" (Sigafoos et al.). It also shows a bigger picture where little is known about LSD, but it is quickly used to treat anything without a known treatment (Novak; Sigafoos et al.).

The conflicts between these sources are ones of perspective. Because the early studies in this field are not what are now considered scientific, there is little concrete fact to be found in any results. The researchers in the first-hand early studies are influenced by the excitement of the possibility of acquiring new treatments for ailments that had long evaded them and of the new boom in pharmacology and the plethora of new drugs (Novak). They seem destined to find positive results, especially when free from the need of an objective and scientific method. The researchers apply the needs of today for concrete objectivism and fully formed scientific method to such studies and find

that much more research with large improvements in method is needed. (Novak; Sigafoos et al.; Krippner).

Literature During the Prohibition of Psychedelics 1967-1990

During this time period, LSD and the other psychedelic drugs were added to the DEA's Schedule I List, meaning they were dangerous even in supervised medical settings and without medical benefit (Baruss, Aaronson; Sigafoos et al.; Friedman; Mishan; Williams; Novak; Edwards; Grinspoon & Doblin). This followed the peak of the 'hippie' counterculture and its frequent misuse of the drugs. The media sensationalized and exaggerated stories of deaths and psychosis indirectly resulting from the use of psychedelic drugs (Baruss; Friedman; Williams; Grinspoon & Doblin). Due to a crisis involving another experimental drug, thalidomide, the government quickly imposed restrictions on LSD (Novak). These restrictions escalated until LSD was firmly prohibited in sale and possession. In response, Sandoz, the manufacturer of medical grade LSD halted export to the US and much of Europe, ending legitimate research in the field (Baruss; Grinspoon & Doblin; Mishan; Williams; Novak; Friedman). Between 1967 and 1990 only underground research and legal research on animals was carried on.

That being said, the literature in this time period is minimal and follows the view of the leading authority of the time, the DEA ("NIDA"). This source neglects to mention any previous research and firmly proclaims that psychedelics are dangerous, despite their non-addictive nature. Particular attention is paid to the negative aspects of the drugs, namely the possibility of disturbing and terrifying thoughts, flashbacks, or temporary psychosis. The qualities early researchers found to be beneficial for psychotherapy (e.g. intensification of emotion, regression, profound insight) are labeled "delusions" ("NIDA"). Negative effects of the drugs are given without mention of the prevention methods found by many early researchers (Cohen; Hoffer; Kast) and recognized by many researchers today (Baruss; Novak; Friedman; Grinspoon & Doblin).

A few other documents can be found that give an opposing viewpoint to the leading authority. These sources follow the general theme that the prohibition on psychedelics is an infringement to freedom and is snuffing out research that could yield important findings in psychotherapy (Mishan; Aaronson; Williams). Williams discusses the underground research done during this time period by Dr. Alexander Shulgin as a means to demonstrate the political underpinnings of the ban on psychedelics. Shulgin's main research was on derivatives of the main psychedelics. He held a Schedule I license and thus could legally research these drugs. He avoided unwanted controversy and press by using only himself and a small ring of colleagues to test the drugs. As the restrictions on psychedelics grew tighter, the use of any derivative of these drugs also was made illegal. Undeterred, Shulgin continued his research, mainly on the drug MDMA, or ecstasy, until he published two books: *PIHKAL* and *TIHKAL*. Upon releasing his findings into the public domain he was immediately shut down by the government. Williams discusses this topic with little opinion on the righteousness of the government's decision, he is more concerned with the real reasons the government illegalized the drugs and forcibly discontinued research.

Other sources from this time include essays by Bernard Aaronson and Edward Mishan. Mishan is disturbed by the government's restrictions, and argues his point in a philosophically libertarian fashion. To Mishan, the foundations of capitalism are called into question by the psychedelics. A psychedelic experience causes the user to further question existence and existing structure. Aaronson seconds this view, although he does not argue for the full legalization of LSD, but the legalization of medical uses of the drug. He states, "A great many people who normally would be law-abiding citizens are placed in the position of outlaws, with marked implications for their further

relationships to society and its institutions" (17). He also sees that psychedelic experiences would make the government wary. "Once the question of 'Why, indeed, should I respond this way?' has been posed, many of the structures of society will tumble if answers cannot be found rooted in the existential being of the questioner," he claims in a discussion on American commercialism and consumerism (13).

These sources differ vastly from both the early research and the dominant viewpoint at the time they were written, but in different ways. The documents differ in context and content from the early research, few recent studies are present due to the ban. However, these sources share the same opinions found in the early works: medical research in the use of LSD should be continued because of its potential and lack of serious adverse effects if handled properly (Aaronson; Mishan; Kast; Hoffer; Richardson; Sigafoos et al.; Novak; Williams). As Aaronson says, "It is difficult to set up safeguards for the proper use of the major psychedelics when their use is illegal" (17). In this respect, both the early sources and these sources differ from the leading authority that developed in the late 1960's. This authority found no benefit in hallucinogenics and even appears to have been threatened by them.

Recent Research 1990-Present

A slight increase in the literature can be seen throughout the 1990's as the research on humans resumed. Most of these sources reflect on the pre-prohibition studies to determine if and how research should be resumed. These sources can be categorized by differing opinions on the directions new research should take. The sources that suggest LSD and the other psychedelics have great potential in psychiatry evaluate the early studies in an attempt to learn from their mistakes (Sigafoos et al.; Friedman) The discussion regarding the study of LSD to treat autism is among these. The methods used in the studies are critiqued, but the main message is that LSD treatment should only be administered for a valid reason, not merely because "nothing else has worked" (Sigafoos et al.). These sources do fault the earlier studies for flawed methods, namely the data collection by observation and the subjective and personally invested interpretations of these observations.

Other sources express the opinion that there were not enough positive results to outweigh the negative consequences of LSD research (Novak; Edwards; Baruss). These sources cite the same flawed methods common in the early studies, but also find it necessary to reexamine the bigger picture surrounding LSD research. Edwards seems to be in the opinion that psychedelic research was absurd to begin with and does not advocate continuing research. His views are very similar to those of the leading authority at this time, the same authority that has been intact since 1967. In Baruss's review of the early literature, he finds the results of most early research meaningless due to lack of control, lack of operant variables, and subjectivity. He suggests that most positive results are due to the experimenters' desire to find them, and this view is logical considering the early experiments had few limitations on how observations could be interpreted. Baruss does find the research done in LSD along with psychotherapy to treat anxiety about dying in terminally ill subjects to be intriguing. This study was unique in its follow-up on patients and the objective questionnaire given to subjects after their experience. The majority of subjects felt the treatment helped them overcome their fear of dying and would take part in such an experience again. These experimenters also kept their patients' well being in mind, and would sedate the subjects if they began to have a bad experience or grew tired (Kast). Because of this study, Baruss concludes that new research is needed to determine how proper a treatment LSD with psychotherapy is in cases such as this. Novak discusses the methodology, the reasoning, and the context when making his conclusions regarding continuing research. He agrees that much of the methodology and reasoning in the early research was flawed, but he also makes note of the larger-scale consequences of this research. Unqualified and greedy

therapists were the ignition of LSD's fame and its arrival into the black market. Novak stresses the need for high control and restrictions on who is to handle the drugs in any new research to prevent these abuses from happening again.

Apart from these reflections, new studies and suggestions are emerging. These sources agree that psychedelic drugs are potentially beneficial to psychotherapy (Friedman; Grinspoon & Doblin; Sewell). For the most part, these sources also use reflection of early research and make suggestions based on the errors or previous experiments, but new experiments are far from error proof. In Sewell's study to evaluate psychedelics as a treatment for cluster headaches, it is disappointing to see how small a sample is used and that the results are derived from brief surveys. Grinspoon and Doblin suggest that an alternative to LSD should be used and offer MDMA due to its mild effects in low doses and its short duration. Grinspoon and Friedman also agree on another point concerning new research: it is important to remember LSD should only be used as an adjunct to psychotherapy, or as a "catalyst" as Grinspoon phrases it. Friedman finds the biological orientation of new experiments disappointing, because they do not treat a person as a whole and they do not effectively combine psychedelics with psychotherapy. Psychedelics are mostly psychological in effect and he feels that this is where their greatest benefit to the medical field will be derived.

Conclusion

The literature available on LSD research is very sporadic and rife with conflicting opinions. While there is a magnitude of early literature that follows the same general opinion, it grows sparse and incongruent after the prohibition of the psychedelics. As interest in this subject is renewed, it is imperative that these rifts in opinion between the government, the early researchers, and the new researchers are diminished so that the true benefits and potential of the psychedelics can be discovered. Results were found in the 50's and 60's that still warrant interest today, suggesting some level of significance. New research that delves deeper into combining the biological and the psychological aspects of both the drug and man, as well as into alternative psychedelics like MDMA is greatly needed. The quiet nature of LSD research today can be seen as a means. We must avoid the exaggerations and drama the media and the common man created at the peak of LSD's popularity. We must prevent the same kind of unfortunate events that led to the prohibition of the drug and the abandonment of its research fifty years ago.

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